## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10807449

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS						•	]	RATE	FEE	7	RATE	FEE	
SOD.			NII II 4050		NII II 45	USD SYTDA		BASIC FEE		-	BASIC FEE	<del></del>	
FOR .			NUMBER FILED			ER EXTRA		BASIC FEE	365.00	OR	DASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			43mir	nus 20=	<u>• থ</u>	3		X\$ 9=		OR	X\$18=	الماك	
INDEPENDENT CLAIMS			m	inus 3 =				X43=	`	OR	X86=		
M	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=	(	
* If the difference in column 1 is less than zero, el					"0" in c	column 2	,	TOTAL		OR	TOTAL	1311	
CLAIMS AS AMENDED - PART II										4	OTHER	THAN	
		(Column 1)	., <u>.</u>	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 <u> </u>	
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF M	JUITPLE DE	PENDENT	CLAIM		! [	+145=		OR	+290=		
					·		L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	(Column 3)	Î	ADDII. FEE 1	. <u> </u>							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA	$\int$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	<u>OH</u>	=		X\$ 9=		OR	X\$18=	155	
	Independent		Minus	***	-	= .	<b>1</b>	X43=	•		X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				CLAIM		1 F	^43-		OR	A00=		
								+145=		OR	+290=		
							A	TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)			• . • •				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	╽┞	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		ı			
• 1	f the entry in colu	mn 1 is less than th	e entry in colu	nn 2. write	"O" in coli	umn 3		+145=		OR	+290=	· ·	
**	f the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE is	less than	20, enter "20."	A	TOTAL DDIT. FEE		OR ,	TOTAL LODIT, FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													